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## REQUEST FOR

## CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
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n of information unless it displa	ys a valid OMB control number.
Application Number	10/071,037
Filing Date	02/08/2002
First Named Inventor	Logan, B.
Art Unit	3714
Examiner Name	Harris, C.
Attorney Docket Number	4527-103.1 US

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

						<u> </u>		
Submission real     a. ⊠ Previously s	quired under 37 CFR ubmitted	§1.114						
i. Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on March 10, 2003								
(Any unente	red amendment(s) referre	d to above	will be entered).	•		•		
ii. □ Consider iii. □ Other	the arguments in the	Appeal B	rief or Reply B	rief pre	viously filed on	<del></del>		
b.  Enclosed				<del></del>	•			
***	lment/Reply	iii. 🔲	Information F	)isclosi	ire Statement (IDS)			
	it(s)/Declaration(s)	iv.	Other		( ( ( ))			
2. Miscellaneous						· ,		
a.   Suspension	of action on the abov	e-identifie	d application is	reque	sted under 37 CFR	§1.103(c) for		
a period of months (Period of suspension shall not exceed 3 months; Fee under 37 CFR§1.17(I) required) b.  Other								
3. Fees The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.								
a. 🗵 The Director is hereby authorized to charge the following fees, or credit any overpayments, to								
Deposit Acco	ount No. <u>13-2165</u>	. :						
i. 🛛 RCE fe	e required under 37	<b>CFR §1.1</b>	7(e) 04/17	7/2003 S	FELEKE1 00000131 1007	1037		
ii. 🔯 Extension of time fee (37 CFR 881 136 and 1 17) 01 FC 2801								
iii. 🔲 Other				<del> </del>		375.00 OP		
	amount of \$ 430		enclosed			,		
C. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not								
be included (	on this form. Provide	credit car	d information a	na autr	iorization on P10-20	J38.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED								
Name (Print / Type)	Diane Dunn McKay		,	Registr	ation No. (Attorney / Agent)	34,586		
Signature	1206	2		Date	April 11, 2003			
CERTIFICATE OF MAILING OR TRANSMISSION								
hereby certify that this con n envelope addressed to: ndTrademark								
Name (Print / Type)	Diane Dunn McKay							
Signature	016 ·	R		Date	April 11, 2003			
Control Days Chatemants This A	in anti-material to take 0.2 h	$\bigcirc$	lata Tlana will was	4	upon the needs of the indiv	Advis and Advis and advis		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.